**FRENCH GOVERNMENT’S CONTRIBUTION TO**

**THE ROYAL GOLDEN JUBILEE PROJECTS FOR YEAR 2021**

**APPLICATION FORM**

**I. INFORMATION SUMMARY ON THE PROJECT:**

**I.I. Project Title: ….………………………………………………………………………………………………………………**

**……………………………………………………………………………………………………………………………………………..  
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I.II. ADVISOR AND CO-ADVISORS:  
 a) ADVISOR :**   
 **Name: ……………………………………………………………………………………………………………………….  
 Position: ……………………………………………………………………………………………………………………  
 Institution: ………………………………………………………………………………………………………………..  
 Professional Address: ………………………………………………………………………………………………  
 Professional Phone Number(s): ……………………………………………………………………………..  
 Professional Fax Number(s): …………………………………………………………………………………..  
 Professional E-mail: …………………………………………………………………………………………………**

**b) CO-ADVISORS :**

**Name: ……………………………………………………………………………………………………………………….  
Position: ……………………………………………………………………………………………………………………  
Institution: ………………………………………………………………………………………………………………..  
Professional Address: ………………………………………………………………………………………………  
Professional Phone Number(s): ……………………………………………………………………………..  
Professional Fax Number(s): …………………………………………………………………………………..  
Professional E-mail: …………………………………………………………………………………………………**

**Name: ……………………………………………………………………………………………………………………….  
Position: ……………………………………………………………………………………………………………………  
Institution: ………………………………………………………………………………………………………………..  
Professional Address: ………………………………………………………………………………………………  
Professional Phone Number(s): ……………………………………………………………………………..  
Professional Fax Number(s): …………………………………………………………………………………..  
Professional E-mail: …………………………………………………………………………………………………**

**Name: ……………………………………………………………………………………………………………………….  
Position: ……………………………………………………………………………………………………………………  
Institution: ………………………………………………………………………………………………………………..  
Professional Address: ………………………………………………………………………………………………  
Professional Phone Number(s): ……………………………………………………………………………..  
Professional Fax Number(s): …………………………………………………………………………………..  
Professional E-mail: …………………………………………………………………………………………………**

**c) STUDENT :**   
 **Name: ……………………………………………………………………………………………………………………….  
 Position: ……………………………………………………………………………………………………………………  
 Institution: ………………………………………………………………………………………………………………..  
 Professional Address: ………………………………………………………………………………………………  
 Professional Phone Number(s): ……………………………………………………………………………..  
 Professional Fax Number(s): …………………………………………………………………………………..  
 Professional E-mail: …………………………………………………………………………………………………**

***(PLEASE PROVIDE THE RESUME OF ADVISOR, CO-ADVISORS AND STUDENT)***

**II. COLLABORATION RECORDS**

When and how did your collaboration with the French Co-Advisor start (please describe briefly any other joint projects you have been conducting in the past with the French Co-advisor(s))?

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**III. PROJECT**

Project Title:

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**……………………………………………………………………………………………………….……………….…………………….**

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Duration:

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Long-term and Immediate Objectives:

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**IV. TRAVEL PLAN (student and (co) advisors):**

|  |  |
| --- | --- |
| Date | Action |

**V. REQUEST FOR FRENCH EMBASSY'S SUPPORT:**

If you are planning to request the French Embassy's support for your student, please indicate which kind of support:

a) Living allowances for additional duration of stay (please indicate the number of months you require and the approximate dates): ……………………………………………………………………………………..  
*NB: Considering that the Royal Golden Jubilee Grant covers up to 12 months in France, you are entitled to request up to 6 months (living allowances only)*

b) Medical insurance scholarship (YES or NO): …………………………………………………………………………..

*NB: You are entitled to request a medical insurance delivered by the French Government for the WHOLE duration of the student' stay(s) in France (whether or not the living allowances are supported by the French Embassy)*

c) Support for French language course (YES or NO): ………………………………………………………………….

*NB: It is recommended that the students should learn French language in order to facilitate their stays in France. Therefore, the French Embassy is offering to support French language course at Alliance Française in Bangkok (course are available on evenings during the week or on week-ends).*

d) Others (other specific request for the French Embassy's support): …………………………………….  
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**VI. OTHER SOURCES OF FUNDING:**

Please indicate if and from which sources of funding your research project is benefiting other than the Royal Golden Jubilee Grant and the French Embassy's support: ……………………………….  
………………………………………………………………………………………………………………………………………………………….

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Signature (Student): ………………………………………………. Date: …………………………………………..

Signature (Advisor): ……………………………………….………. Date: …………………………………………..